

Division of Health Care Facilities

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: TN7502	(X2) MULTIPLE CONSTRUCTION A. BUILDING: 02 - BOULEVARD TERRACE NURSING HOME B. WING: _____		(X3) DATE SURVEY COMPLETED 01/04/2016
NAME OF PROVIDER OR SUPPLIER BOULEVARD TERRACE REHABILITATION AND			STREET ADDRESS, CITY, STATE, ZIP CODE 1530 MIDDLE TENNESSEE BLVD MURFREESBORO, TN 37130		
(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETE DATE	
N 848	<p>1200-8-6-.08 (18) Building Standards</p> <p>(18) It shall be demonstrated through the submission of plans and specifications that in each nursing home a negative air pressure shall be maintained in the soiled utility area, toilet room, janitor's closet, dishwashing and other such soiled spaces, and a positive air pressure shall be maintained in all clean areas including, but not limited to, clean linen rooms and clean utility rooms.</p> <p>This Rule is not met as evidenced by: Based on observations the facility failed to maintain exhaust systems.</p> <p>The findings included:</p> <p>Observation on 1/4/2016 at 10:17 AM, revealed negative air pressure was not maintained in staff bathroom located inside the A/B nurses station.</p> <p>NFPA 101, 19.5.2.1 (2000 Edition)</p> <p>This finding was verified by the director of maintenance and acknowledged by the administrator during the exit conference on 1/4/2016.</p>	N 848	<p>N 848</p> <p>1. The negative air pressure vent in the bathroom of A/B nurses station will be fixed by February 6, 2016 by the maintenance department.</p> <p>2. Soiled utility areas, toilet rooms, janitor closet, dishwashing and other soiled spaces were inspected by the maintenance department on 1-14-16 and all were found to be working properly.</p> <p>3. Education was done on 1-14-16 by the Administrator with the maintenance department regarding the regulation that negative air pressure shall be maintained in the soiled utility area, toilet room janitor's closet, dishwashing and other such soiled spaces, and a positive air pressure shall be maintained in all clean areas including clean linen rooms and clean utility rooms.</p> <p>4. The Director of Maintenance or designee will ensure that rooms required to have negative air pressure are working weekly x 4 weeks and then monthly afterwards on a preventative maintenance program.</p> <p>5. February 6, 2016</p>	02-06-16	

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LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

Andrea Bagwell, RN

TITLE

Administrator

(X6) DATE

1-14-16

STATE FORM

6099

TJYQ21

If continuation sheet 1 of 1